

# TRANSMITTAL FORM

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Filing Date	January 20, 2006
First Named Inventor	Heimann, Alfred
Group Art Unit	2859
Examiner Name	Bennett, George B.
Attorney Docket No.	20496-483
Patent No.	Not yet assigned
Issue Date	Not yet assigned

## ENCLOSURES (check all that apply)

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|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul> <input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets <u>      </u>]</li> </ul> <input type="checkbox"/> Petition for Extension of Time | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)                      | <input type="checkbox"/> Request for Certificate of Correction  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)   | <input type="checkbox"/> Replacement Drawing(s)  | <input type="checkbox"/> Certificate of Correction  |
| <input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>  | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal                                 | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  |
|   | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)                                      | <input type="checkbox"/> Appeal Brief   |
|   | <input type="checkbox"/> Terminal Disclaimer   | <input type="checkbox"/> Status Inquiry   |
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|   | <input type="checkbox"/> Amendment After Allowance   | <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8  |
|   |  | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Response to Notice to File Corrected Application Papers (Notice of Allowance Mailed) (2 pages)</li> <li><input checked="" type="checkbox"/> Copy of Notice to File Corrected Application Papers (3 pages)</li> <li><input checked="" type="checkbox"/> Replacement Figures (5 sheets)</li> </ul> |

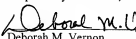
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